08 -10□01 □ Ref RCE

Docket Number: VLSI-2759.CPA

RCE# 3724 w/ Ext 8/15/01

I hereby certify that this transmittal of the below described documents is being deposited with the United States Postal Service in an envelope bearing Express Mail Postage and an Express Mail label, with the below serial number, addressed to the Commissioner of Patents and Trademarks, Washington, D.C., 20231, on the below date of deposit.			
Express Mail Label No.:	EL864469495US	Name of Person Making the Deposit:	ANTHONY CHOU
Date of Deposit:	08/08/01	Signature of the Person Making the Deposit:	Anthony Chou

In re Application of: Charles F. Drill and Milind Weling

Serial No.: 08/ 824,633

Filed: 03/27/97

Examiner: Rachuba, M.

Art Unit: 3724

For: A CUSTOMIZED POLISHING PAD FOR SELECTIVE PROCESS PERFORMANCE DURING CHEMICAL MECHANICAL POLISHING

Box RCE
Assistant Commissioner for Patents
Washington, D.C. 20231

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL (SUBSECTION(B) OF 35 U.S.C. § 132)

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 for the above-identified application.

1.　　Submission required under a filing under 37 C.F.R. § 1.114

TC 3700 MAIL ROOM　AUG 14 2001　RECEIVED

　　a.　　[ ] Previously submitted

　　i.　　[ ] Consider the amendment(s)/ reply under 37 C.F.R. § 1.116 previously filed on _____
　　　　(Any unentered amendment(s) referred to above will be entered)

　　ii.　　[ ] Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

　　iii.　　[ ] Other _____

　　b.　　**[X]** Enclosed

　　i.　　**[X]** Amendment/Reply

　　ii.　　[ ] Affidavit(s)/Declaration(s)

　　iii.　　[ ] Information Disclosure Statement (IDS)

　　iv.　　[ ] Other _____

08/13/2001 GTEFFERA 00000007 08824633

01 FC:179　　　　　710.00 OP
02 FC:103　　　　　18.00 OP
03 FC:102　　　　　80.00 OP

2.　　Miscellaneous

　　a.　　[ ] Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
　　　　(period of suspension shall not exceed 3 months: Fee under 37 C.F.R. § 1.17(I) required)

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01 FC:116　　　　　350.00 OP

b. .Other _____

Extension of Term

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(a) [X] Applicant petitions for an extension of time under 37 C.F.R. 1.136
(fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension	Fee
[ ] one month	$110.00
[X] two months	$390.00
[ ] three months	$890.00
[ ] four months	$1,390.00

Fee $390.00

If an additional extension of time is required, please consider this a petition therefor.

(b) [ ] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEES DUE

The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

CLAIMS					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEES
Basic Application Fee					$710.00
Total Claims	21	Minus 20=	1	X $18 =	$18.00
Independent Claims	5	Minus 4=	1	X $80 =	$80.00
If multiple dependent claims are presented, add $260.00					$0.00
TOTAL APPLICATION FEE DUE					$808.00

PAYMENT OF FEES

1. The full fee due in connection with this communication is provided as follows:

[X] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.
A duplicate copy of this authorization is enclosed.

[X] A check in the amount of $ 808.00

[X] A check in the amount of $ 390.00

rev. 1/00 kgr

[ ] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: <u>23-0085.</u>
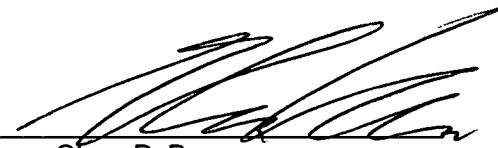
Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP
Two North Market Street, Third Floor
San Jose, California 95113
(408) 938-9060

Respectfully submitted,

Date: _8/8/01_

By: _____
Glenn D. Barnes
Reg. No. 42,293

rev. 1/00 kgr

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number: 08/824633

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	13 minus 20=	* —
INDEPENDENT CLAIMS	5 minus 3 =	* 7
MULTIPLE DEPENDENT CLAIM PRESENT		☐

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

	RATE	FEE		RATE	FEE
	BASIC FEE	355.00	OR	BASIC FEE	710.00
	X$ 9=		OR	X$18=	
	X40=		OR	X80=	80
	+135=		OR	+270=	
	TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY OR **OTHER THAN SMALL ENTITY**

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.